

215047703
70217

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 208	Agency Case No. B5-107337	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1			
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y 11/17/2015		S M T W TH F S <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (In Military Time)		STATE USE ONLY			
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	TIME OF ACCIDENT 1530	POLICE NOTIFIED 1536	11/17/2015			
B	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. A St		PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE			
C	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.		LONGITUDE			
D	IF AT INTERSECTION			IF NOT AT INTERSECTION					
1	NAME OF INTERSECTING ROADWAY			<input checked="" type="radio"/> FEET <input type="radio"/> MILES	N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING			
V1/M	16.00			X Sycamore Dr					
V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN								
01	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN				
E	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO				
1	1								
F	VEHICLE NO. 1								
2	DRIVER LICENSE NO.	H13673816		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE			
V1/N	DRIVER CALEB A FRIESEN		PHONE 4023184951		LOCAL NO.				
V2/N	DRIVER ADDRESS 1200 COTTONWOOD DR, LINCOLN, NE 68510		CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	09/12/1998			
1	OWNER TROY C FRIESEN (4-2-73) / ADEANA FRIESEN (3-1-72)		PHONE 4023043159		LOCAL NO.				
G	OWNER ADDRESS 1200 Cottonwood Dr, Lincoln, NE 68510		CITY, STATE, ZIP		CITATION <input checked="" type="radio"/> YES <input type="radio"/> PENDING <input type="radio"/> NO	CITATION NO. LB478469			
4	LICENSE PLATE PA NO.	TWW059		YEAR (Plate Expires)	2016	STATE (Of Plate) NE			
H	VEHICLE	YEAR 2000	MAKE Chevrolet	MODEL Impala	BODY STYLE 4 door Sedan	COLOR maroon / burgu			
V1/O	VEHICLE ID NO. (VIN) 2G1WF52E4Y9321497		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 3000		INSURANCE COMPANY Allied				
V2/O	TOWED TO		TOWED BY		POLICY NO. PPCM00501393601				
1									
I	VEHICLE NO. 2								
2	DRIVER LICENSE NO.	H13688298		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE			
V1/P	DRIVER CONNOR P FRENCH		PHONE 4023183388		LOCAL NO.				
V2/P	DRIVER ADDRESS 600 Sunny Slope Rd, LINCOLN, NE 68505		CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	10/30/1998			
1	OWNER DONALD H FRENCH (10-18-64)		PHONE 4029374185		LOCAL NO.				
J	OWNER ADDRESS 600 Sunny Slope Rd, Lincoln, NE 68505		CITY, STATE, ZIP		CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.			
02	LICENSE PLATE PA NO.	TWF024		YEAR (Plate Expires)	2016	STATE (Of Plate) NE			
V1/Q	VEHICLE	YEAR 2000	MAKE BMW	MODEL 528i	BODY STYLE 4 door Sedan	COLOR silver / chrome			
V2/Q	VEHICLE ID NO. (VIN) WBADM6343YGU19855		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 1500		INSURANCE COMPANY Progressive				
K	TOWED TO		TOWED BY		POLICY NO. 904559603				
02									
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 2 3 4 5	SEX M F			
VEH. #	NAME	ADDRESS		1 Seat Position	2 Eject	3 Body Region	4 Injury Sev.	5 Trans.	
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.				
VEH. #	NAME	ADDRESS		1	2	3	4	5	
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.				
VEH. #	NAME	ADDRESS		1	2	3	4	5	
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.				

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-107337

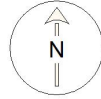


Indicate
North
by Arrow

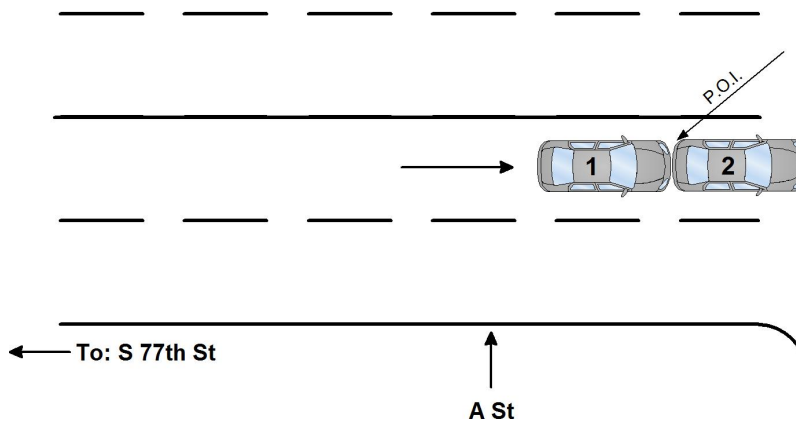
POI:
16' - W of W curb of Sycamore Dr
16' - N of S curb of A St
43' - width of A St

All measurements approx.
No skid marks obs.

Not To Scale



Sycamore Dr →



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Dr1 stated he was operating a motor vehicle traveling eastbound on A St in the inside lane, between S 77th St & Sycamore Dr, at a reported speed of 40 mph. Dr1 stated he observed Veh2 in front of him, which had slowed to turn northbound onto Sycamore Dr from A St, and he attempted to stop. Dr1 stated he was unable to stop in time and 'slid into' Veh2 in front of him. Dr2 stated he was operating a motor vehicle traveling eastbound on A St in the inside lane, between S 77th St & Sycamore Dr, and had slowed to turn northbound onto Sycamore Dr. Dr2 stated Veh1 rear-ended his vehicle, resulting in an accident.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME ADDRESS PHONE				PHONE
	NAME ADDRESS PHONE				PHONE

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA <small>(Enter numbers for each vehicle)</small>				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS				ALCOHOL/DRUGS SUSPECTED			
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME	VEHICLE 1		VEHICLE 2										VEH 1		VEH 2		1	
1			X		A St	POINT OF IMPACT	01	POINT OF IMPACT	05	<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">4</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">4</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>	
2			X		A St	MOST DAMAGED AREA	01	MOST DAMAGED AREA	05	<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">4</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">4</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>	
1	01				06 Turning left					<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>	
2	11				08 Entering traffic lane					<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>				<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">N</div> </div>	
					01 Essentially straight ahead	02 Backing	03 Changing lanes	04 Overtaking/Passing	05 Turning right	06 Turning left	07 Making U-turn	08 Entering traffic lane	09 Leaving traffic lane	10 Parked	11 Slowing or stopped in traffic	12 Other	13 Unknown						
					<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px; text-align: center;">2</div> </div>																		

OFFICER NO. 1642	TROOP/TEAM/BEAT SE	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) Jacob Wilkinson		INVESTIGATOR SIGNATURE Approved by Officer Jacob Wilkinson	
DATE OF REPORT 11/17/2015			